FORMAT and FILE SPECIFICATIONS
for
MIRCal ONLINE TRANSMISSION

INPATIENT DATA

April 2004

MIRCal
Medical Information Reporting for California

State of California
Office of Statewide Health Planning and Development (OSHPD)
Patient Data Section
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STANDARD FORMAT AND SPECIFICATIONS
FOR ONLINE TRANSMISSION

MINIMUM PC CONFIGUATION

1. Access to a personal computer (with the following minimum configuration)
    - 300MHz processor, 64 MB RAM, 4 GB hard drive (at least 500MB free)
    - High speed Internet connection (preferred) or 56k modem or faster
    - Microsoft Internet Explorer version 5.0 (or higher) with 128-bit Secure Socket Layer (SSL)
    - Adobe Acrobat Reader version 4.0 (or higher)
    - Virus Checking Software
    - File Compression Program MIRCal accepts files that are 3MB or less. Data files over 3MB must be compressed in order to be accepted by MIRCal.
    - Optional CD-ROM
2. Internet access (ISP)
3. E-mail

STANDARD RECORD FORMAT

Deviation from the format will not be accepted.
- One reporting facility and time period per file.
- Standard ASCII character coding.
- Record length 520 characters followed by a carriage return and line feed.

ADDITIONAL REQUIREMENTS

- No packed or binary data.
- No Null Values
- The data file must be a text file with the extension of ".txt" (if zipped, submit the zipped file with a ".zip" extension).

FILE COMPRESSION

Data files may be compressed (zipped) to speed up the file uploading time. The following compression applications are supported and can be obtained from the manufacturer's website:
- gzip
- Pkzip
- Winzip

FOR USE WITH DISCHARGES ON AND AFTER 1/1/2001

STANDARD FORMAT AND SPECIFICATIONS
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Standard Record Format

Data Element	From	Through	Format[1]
Patient's Type of Care	1	1	N(1)
Facility Identification Number	2	7	N(6)
Date of Birth	8	15	N(8)
Sex	16	16	N(1)
Race			
Ethnicity	17	17	N(1)
Race	18	18	N(1)
ZIP Code	19	23	X(5)
Admission Date	24	31	N(8)
Source of Admission			
Site	32	32	N(1)
Licensure of Site	33	33	N(1)
Route of Admission	34	34	N(1)
Type of Admission	35	35	N(1)
Discharge Date	36	43	N(8)
Principal Diagnosis	44	48	X(5)
Principal Diagnosis Present at Admission	49	49	A(1)
Other Diagnoses	50	-----	X(5)[2]
Other Diagnoses Present at Admission	-----	193	A(1)[2]
Principal Procedure Code	194	197	X(4)
Principal Procedure Date	198	205	X(8)
Other Procedure Codes	206	-----	X(4)[3]
Other Procedures Dates	-----	445	X(8)[3]
Principal E-Code	446	450	X(5)
Other E-Codes	451	470	X(5)[4]
Patient's Social Security Number	471	479	N(9)
Disposition of Patient	480	481	N(2)
Total Charges	482	488	N(7)
Abstract Record Number	489	500	X(12)
DNR Order	501	501	A(1)
Unused	502	502	X(1)
Expected Source of Payment			
Payer Category	503	504	N(2)
Type of Coverage	505	505	N(1)
Plan Code Number	506	509	N(4)
Unused	510	520	X(11)

Footnotes are on Page 3

FOR USE WITH DISCHARGES ON AND AFTER **1/1/2001**

FOOTNOTES

[1]Format indicates data type and length (in parentheses). Data type is defined as:

    A = Alpha
    N = Numeric
    X = Alphanumeric

[2]This variable and its format occurs 24 times. Fill from the left-most position and **DO NOT** skip fields. Each other diagnosis and its condition present at admission is paired. The first pair is in positions 50-55, the second pair in 56-61, the third pair in 62-67, and so on consecutively through 24 pairs.

[3]This variable and its format occurs 20 times. Fill from the left-most position and DO NOT skip fields. Each other procedure and its date is paired. The first pair is in positions 206-217, the second pair in 218-229, the third pair in 230-241, and so on consecutively though 20 pairs.

[4]This variable and its format occurs 4 times. Fill from the left-most position and **DO NOT** skip fields.

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STANDARD FORMAT AND SPECIFICATIONS
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PATIENT'S TYPE OF CARE

Record Position:	1
Data Length:	1
Data Type:	Numeric
Codes:	1 = Acute Care
	3 = Skilled Nursing/Intermediate Care
	4 = Psychiatric Care
	5 = Chem Dependency Recovery Care
	6 = Physical Rehabilitation Care

FACILITY IDENTIFICATION NUMBER

Record Positions:	2 through 7
Data Length:	6
Data Type:	Numeric
Codes:	Facility Identification Number (the unique facility number assigned by OSHPD). This field is required for each record.

DATE OF BIRTH

Record Positions:	8 through 15
Data Length:	8
Data Type:	Numeric
Codes:	99 99 9999
	Month Day Year

Special Instructions:	Single-digit months and days must include a preceding zero.

S_EX

Record Position:	16
Data Length:	1
Data Type:	Numeric
Codes:	1 = Male
	2 = Female
	3 = Other
	4 = Unknown

R_ACE

Ethnicity

Record Position:	17
Data Length:	1
Data Type:	Numeric
Codes:	1 = Hispanic
	2 = Non-Hispanic
	3 = Unknown

R_ACE

Record Position:	18
Data Length:	1
Data Type:	Numeric
Codes:	1 = White
	2 = Black
	3 = Native American/Eskimo/Aleut
	4 = Asian/Pacific Islander
	5 = Other
	6 = Unknown

FOR USE WITH DISCHARGES ON AND AFTER 1/1/2001

ZIP CODE

Record Positions:	19 through 23
Data Length:	5
Data Type:	Alphanumeric
Codes:	5 digit ZIP Code
	XXXXX = Unknown
	YYYYY = Foreign
	ZZZZZ = Homeless

ADMISSION DATE

Record Positions:	24 through 31		
Data Length:	8		
Data Type:	Numeric		
Codes:	99	99	9999
	Month	Day	Year

Special Instructions: Single-digit months and days must include
                             a preceding zero.

STANDARD FORMAT AND SPECIFICATIONS
FOR ONLINE TRANSMISSION

<u>S</u>OURCE OF <u>A</u>DMISSION

Site
Record Position:	32
Data Length:	1
Data Type:	Numeric
Codes:	1 = Home
	2 = Residential Care Facility
	3 = Ambulatory Surgery
	4 = Skilled Nursing/Intermediate Care
	5 = Acute (Inpatient) Hospital Care
	6 = Other (Inpatient) Hospital Care
	7 = Newborn
	8 = Prison/Jail
	9 = Other

Licensure of Site
Record Position:	33
Data Length:	1
Data Type:	Numeric
Codes:	1 = This Hospital
	2 = Another Hospital
	3 = Not a Hospital

Route of Admission
Record Position:	34
Data Length:	1
Data Type:	Numeric
Codes:	1 = <u>Your</u> Emergency Room
	2 = Not <u>Your</u> Emergency Room

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TYPE OF ADMISSION

Record Position:	35
Data Length:	1
Data Type:	Numeric
Codes:	1 = Scheduled
	2 = Unscheduled
	3 = Infant, under 24 hrs. old
	4 = Unknown

DISCHARGE DATE

Record Positions:	36 through 43		
Data Length:	8		
Data Type:	Numeric		
Codes:	99	99	9999
	Month	Day	Year

Special Instructions: Single-digit months and days must include a preceding zero.

PRINCIPAL DIAGNOSIS

Record Positions:	44 through 48
Data Length:	5
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification

Special Instructions: The ICD-9-CM code must be left-justified and space-filled. The default value is all spaces.

STANDARD FORMAT AND SPECIFICATIONS
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PRINCIPAL DIAGNOSIS CONDITION PRESENT AT ADMISSION

Record Position:	49
Data Length:	1
Data Type:	Alpha
Codes:	Y = Yes
	N = No
	U = Uncertain

OTHER DIAGNOSES

Record Positions:	50 through 54, 56-60, 62-66, etc. consecutively through <u>24</u> codes ending in position 192
Data Length:	5
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification
Special Instructions:	The ICD-9CM code must be left-justified and space-filled. Fill from the left-most position and **DO NOT** skip fields The default value is all spaces. Do not include E-codes.

OTHER DIAGNOSES CONDITIONS PRESENT AT ADMISSION

Record Positions:	55, 61, 67, etc. consecutively through <u>24</u> codes ending in position 193
Data Length:	1
Data Type:	Alpha
Codes:	Y = Yes
	N = No
	U = Uncertain

FOR USE WITH DISCHARGES ON AND AFTER **1/1/2001**

PRINCIPAL PROCEDURE AND DATE

Principal Procedure Code
Record Positions:	194 through 197
Data Length:	4
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification

Special Instructions:	The Principal Procedure Code must be left-justified and space-filled. The default value is all spaces.

Principal Procedure Date
Record Positions:	198 through 205
Data Length:	8
Data Type:	Alphanumeric
Codes:	99 99 9999 Month Day Year

Special Instructions:	Single-digit months and days must include a preceding zero. When there is no Principal Procedure, the default value is all spaces.

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OTHER PROCEDURES AND DATES

OTHER PROCEDURE CODES

Record Positions:	206 through 209, 218-221, 230-233, etc. consecutively through 20 codes ending in position 437
Data Length:	4
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification
Special Instructions:	Other Procedure Codes must be left-justified and space-filled. Fill from the left-most position and **DO NOT** skip fields. The default value is all spaces.

OTHER PROCEDURE DATES

Record Positions:	210 through 217, 222-229, 234-241, etc. consecutively through 20 codes ending in position 445
Data Length:	8
Data Type:	Alphanumeric
Codes:	99 99 9999 Month Day Year
Special Instructions:	Single-digit months and days must include a preceding zero. When there are no Other Procedures Codes, the default value is all spaces.

STANDARD FORMAT AND SPECIFICATIONS
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PRINCIPAL E-CODE

Record Positions:	446 through 450
Data Length:	5
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification
Special Instructions	The ICD-9-CM code must be left-justified and space-filled. The default value is all spaces.

OTHER E-CODES

Record Positions:	451 through 455, 456-460, 461-465, and 466-470 (maximum of 4 E-Codes)
Data Length:	5
Data Type:	Alphanumeric
Codes:	International Classification of Diseases, 9th Revision, Clinical Modification
Special Instructions:	The ICD-9-CM code must be left-justified and space-filled. The default value is all spaces.

PATIENT'S SOCIAL SECURITY NUMBER

Record Positions:	471 through 479
Data Length:	9
Data Type:	Numeric
Codes:	Enter the full 9-digit SSN including zeros. **DO NOT** use hyphens. Enter 000000001 (Unknown) if the SSN is not recorded in the patient's medical record.

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D<small>ISPOSITION OF</small> P<small>ATIENT</small>

Record Positions:	480 through 481
Data Length:	2
Data Type:	Numeric
Codes:	01 = Routine Discharge
	02 = Acute Care Within This Hospital
	03 = Other Type of Hospital Care Within This Hospital (Psych, Chem Dep, Physical Rehab)
	04 = Skilled Nursing/Intermediate Care Within This Hospital
	05 = Acute Care at Another Hospital
	06 = Other Type of Hospital Care at Another Hospital (Not Skilled Nursing/Intermediate Care)
	07 = Skilled Nursing/Intermediate Care Elsewhere
	08 = Residential Care Facility
	09 = Prison/Jail
	10 = Against Medical Advice
	11 = Died
	12 = Home Health Service
	13 = Other
Special Instructions:	Single digit values must include a preceding zero.

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TOTAL CHARGES

Record Positions:	482 through 488
Data Length:	7
Data Type:	Numeric
Codes:	Whole dollars only—no cents. Code 9999999 for Total Charges exceeding 7 positions.
Special Instructions:	Total Charges must be right-justified, zero-filled, and unsigned. The default value is all zeros.

ABSTRACT RECORD NUMBER (OPTIONAL)

Record Positions:	489 through 500
Data Length:	12
Data Type:	Alphanumeric
Code:	Optional medical record number or any patient identification number assigned by the facility.
Special Instructions:	The Abstract Record Number must be left-justified and space-filled. If not reported, the default value is all spaces.

DO NOT RESUSCITATE (DNR) ORDER

Record Position:	501
Data Length:	1
Data Type:	Alpha
Codes:	Y = Yes
	N = No

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UNUSED

Record Position:	502
Data Length:	1
Data Type:	Alphanumeric
Codes:	Space

EXPECTED SOURCE OF PAYMENT

Payer Category

Record Positions:	503 through 504
Data Length:	2
Data Type:	Numeric
Codes:	01 = Medicare
	02 = Medi-Cal
	03 = Private Coverage
	04 = Workers' Compensation
	05 = County Indigent Programs
	06 = Other Government
	07 = Other Indigent
	08 = Self Pay
	09 = Other Payer

Special Instructions:	Single-digit codes must include a preceding zero.

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EXPECTED SOURCE OF PAYMENT, CONTINUED

Type of Coverage

Record Position:	505
Data Length:	1
Data Type:	Numeric
Codes:	1 = Managed Care – Knox-Keene or Medi-Cal County Organized Health System
	2 = Managed Care – Other
	3 = Traditional Coverage

Special Instructions: Type of Coverage MUST be reported if Payer Category 01, 02, 03, 04, 05, or 06 is reported. If Payer Category 07, 08, or 09 is reported, then the default value is zero.

Plan Code Number

Record Positions:	506 through 509
Data Length:	4
Data Type:	Numeric
Codes:	Refer to California Code of Regulations, Section 97232, Definition of Data Element – Expected Source of Payment-Plan Codes

Special Instructions: The Plan Code Number must be right-justified and zero-filled. The Plan Code Number MUST be reported if Type of Coverage 1 is reported. If Type of Coverage 2 or 3 is reported, then the default value is zero (0000).

Unused

Record Positions:	510 through 520
Data Length:	11
Data Type:	Alphanumeric
Codes:	Spaces

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